



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
[www.uspto.gov](http://www.uspto.gov)



CONFIRMATION NO. 9896

Bib Data Sheet

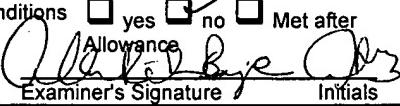
|                             |  |              |                        |                                   |
|-----------------------------|--|--------------|------------------------|-----------------------------------|
| SERIAL NUMBER<br>09/839,664 | FILING OR 371(c)<br>DATE<br>04/19/2001<br>RULE | CLASS<br>705 | GROUP ART UNIT<br>3628 | ATTORNEY DOCKET NO.<br>10005190-1 |
|-----------------------------|--|--------------|------------------------|-----------------------------------|

**APPLICANTS**

Fernando Pedone, San Mateo, CA;

**\*\* CONTINUING DATA \*\*\*\*\*****\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 06/13/2001

|   |  |                        |                     |                    |                         |
|---|--|------------------------|---------------------|--------------------|-------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no  | 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met | STATE OR COUNTRY<br>CA | SHEETS DRAWING<br>7 | TOTAL CLAIMS<br>16 | INDEPENDENT CLAIMS<br>2 |
| Verifier and Acknowledged<br><br>Examiner's Signature |  | Initials               |                     |                    |                         |

**ADDRESS**

HEWLETT-PACKARD COMPANY  
 Intellectual Property Administration  
 P.O. Box 272400  
 Fort Collins, CO80528-9599

**TITLE**

E-ticket validation protocol

|                            |   |   |
|----------------------------|---|---|
| FILING FEE RECEIVED<br>710 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
|----------------------------|---|---|